

Signed under the penalties of perjury:

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

OCT 2 6 2015

Commonwealth			CITY STED	
Fill in Reporting Period dates: Beginning Date: 1/1/	2015	File with: Ending Date:	10/16/2015	Kor Election Commiss
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	30 day aft	er election ve	ear-end report	dissolution
William II Buildia	1			
William H. Dwight Candidate Full Name (if applicable)	Committee	to Elect Bill Dwight		
At-Large City Councilor			ittee Name	
Office Sought and District	William A.		nmittee Treasurer	
39 Hyrtle Street, Northampton, MA 01060	145 State 9	Street, Northampton,		
Residential Address	113 30000		Mailing Address	
Telephone Number (optional):	Telephone Nui	mber (optional):		
SUMMARY BALANC	E INFORM	TATION:		
Line 1: Ending Balance from previous report			\$749.2	9
Line 2: Total receipts this period (page 3, line 11)			\$2250.00	
Line 3: Subtotal (line 1 plus line 2)			\$2999.29	9
Line 4: Total expenditures this period (page 5, line	e 14)		\$329.97	7]
Line 5: Ending Balance (line 3 minus line 4)			\$2669.32	
Line 6: Total in-kind contributions this period (page	ge 6)]
Line 7: Total (all) outstanding liabilities (page 7)			\$411.77	
Line 8: Name of bank(s) used: Florence Bank]
Affidavit of Committee Treasurer: certify that I have examined this report including attached schedules and it is, to the best dictivity, including all contributions, loans, receipts, expenditures, disbursements, in-kind committee activity of all persons acting under the authority or on behalf of this committee in a signed under the penalties of perjury:	Mittibiliant and be	alatituse lisa tlain assessations	and a firm of the second	campaign finance s the campaign
OR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check I box	only)			
Sandidate with Committee and no activity independent of the committee certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in accommittee any liabilities nor made any expenditures on my behalf during this reporting p		dge and belief, a true and capturements of M.G.L. c. 5	omplete statement of 5. I have not receive	of all campaign finance red any contributions.
andidate without Committee QR Candidate with independent activity filing sep. I certify that I have examined this report including attached schedules and it is, to the brinance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this	arate report	use need limbilities from the	and the second of the second	f all campaign represents the

(Candidate's signature)

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to

report all receipts. Please include your committee name and a page number on each page.)

	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
9/25/2015	David Chura 68 Leonard St. Leeds, MA 01053	\$75	
9/25/2015	Joseph Curran 74 Masonic St. Northampton, MA 01060	\$50	
9/30/2015	Jenifer Fleming-Ives 15 Dryads Green Northampton, MA 01060	\$25	
9/30/2015	Elliot Fratkin 24 Massasoit St. Northampton, MA 01060	\$100	
9/30/2015	Alex Ghiselin 164 Riverside Drive Baystate Village, MA 01062	\$50	
10/2/2015	Patrick Goggins 20 Bridge Rd., Bear Hill #10 Florence, MA 01062	\$250.00	Realtor, Goggins Real Estate
9/29/2015	Anne Griffin 24 Wilder Place Florence, MA 01062	\$50	
9/30/2015	Jeffrey Harness 180 Overlook Drive Florence, MA 01062	\$35	
9/30/2015	Mary Clare Higgins 106 Laurel Park Northampton, MA 01060	\$50	
9/23/2015	Jon Hite PO Box 661 Hadley, MA 01035	\$100	
10/4/2015	Jack Horner 46 Ladyslipper Lane Florence, MA 01062	\$100.00	
9/29/2015	Nicholas Horton 341 Prospect Street Northampton, MA 01060	\$100	
ine 9: Total Rece	ipts over \$50 (or listed above)	2215	
e 10: Total Reco	cipts \$50 and under* (not listed above)	\$35	
ine 11: TOTAL F	RECEIPTS IN THE PERIOD	2250	← Enter on page 1, line 2
If you have itemized	receipts of \$50 and under include them in line	0 Lina 10 should	

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
6/2015	Chip Kaye 92 High Street Florence, MA 01062	\$35	
9/25/2015	Alisa Klein 18 Chestnut Avenue Leeds, MA 01053	\$50	
9/28/2105	Marianne LaBarge 698 Westhampton Rd Florence, MA 01062	\$50	
9/22/2015	Amy Love 1916 Pike Place Suite 12 #328 Seattle, WA 98101	\$100	
10/1/2015	Richard Millington 639 North Farms Rd Florence, MA 01062	\$50	
0/15/2015	Sharon Moulton 48 Evergreen Rd. Leeds, MA 01053	\$25	
9/30/2015	Dorothy Nemetz 44 Munroe Street Northampton, MA 01060	\$100	
0/2015	Michaela O'Brien 33 Longfellow Drive Florence, MA 01062	\$25	
/30/2015	Mary Oldberding 272 Aldrich Street Belchertown, MA 01007	\$50	
0/1/2015	James Palermo PO Box 205 Southampton, MA 01073	\$25	
/30/2015	Elizabeth Silver 67 Willow St Florence, MA 01062	\$25	
/5/2015	Carlton Vogt 39063 Ciega Creek Drive Palm Desert, CA 92260-1302	\$50	
/30/2015	Susan Voss 89 Ridgewood Terrace Northampton, MA 01060	\$75	
ne 9: Total Recei	pts over \$50 (or listed above)	2215	
ne 10: Total Rece	ipts \$50 and under* (not listed above)	35	
ne 11: TOTAL R	ECEIPTS IN THE PERIOD	2250	← Enter on page 1, line 2

Committee	Name:	Committee	to	Elect	Bill	Dwight

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SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the pation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9/30/2015	Richard Wagner 48 Lyman Road Northampton, MA 01060	\$100	
9/30/2015	Mikal Weiss 78 Main St. Suite 501 Northampton, MA 01060	\$200	Attorney, Burrows, Weiss, Mintz & Lippiello
10/1/2015	Mary Witt 17 Corticelli St. Florence, MA 01062	\$20	
9/30/2015	Martin Wohl 187 Elm St. Northampton, MA 01060	\$50	
10/1/2015	Barbara Wurtzel 79 South St. Northampton, MA 01060	\$100	
9/30/2015	Stella Xanthakos 11 Mountain View Drive Holyoke, MA 01040	\$100	
ne 9: Total Receip	ots over \$50 (or listed above)	2215	
ne 10: Total Recei	pts \$50 and under* (not listed above)	35	
ne 11: TOTAL R	ECEIPTS IN THE PERIOD	2250 ←	Enter on page 1, line 2

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together. from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

ort all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	mmittee name and a page numbe		
	Collective Copies	93 Main St	Purpose of Expenditure	Amount
9/29/2015		Florence, MA 01062	Printing of campaign literature	\$98.
9/30/2015	Florence Pie Bar	17 Main St. Florence, MA, 01062	Food for event on 9/30/15	\$97.0
	The Parlor Room	32 Masonic St.		<u></u>
9/30/2015		Northampton, MA 01060	Rental fee for space for event on 9/30/2015	\$100.0
	Paypal	2221 North 1st Street	Paypal fees	
10/15/2015		San Jose, CA 95131		\$34.6
		Line 12: Total Expenditures ov	er \$50 (or listed above)	329.97
		Line 13: Total Expenditures \$50		
	Enter on page 1, line $4 \rightarrow $ d expenditures of \$50 and under,	Line 14: TOTAL EXPENDIT	URES IN THE PEDIOD	329.97

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
		Line 12: Expenditures over \$50 (or listed above)	
		Line 13: Expenditures \$50 and un		
	Ì			
ou have itemies-	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDITU	RES IN THE PERIOD	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		Line 15: In-Kind Contributions o	ver \$50 (or listed above)	
	1	Line 16: In-Kind Contributions \$5		
fan in hind contrib	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND COM	NTRIBUTIONS	

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

To Whom Due	Address	Purpose	Amount
Alida Lewis	39 Myrtle Street Northampton, MA 01060	Food and supplies for event on 9/30/15	170.92
William A. Scher	145 State Street Northampton, MA 01060	Printing of bumper stickers	\$159.00
William A. Scher	145 State Street Northampton, MA 01060	Supplies for event on 9/30/15	\$5.74
William A. Scher	145 State Street Northampton, MA 01060	Food and supplies for event on 9/30/15	\$31.06
Kathleen Wight	20 Northern Ave Northampton MA 01060	Campaign email using Campaign Monitor	\$22.88
Kathleen Wight	20 Northern Ave Northampton MA 01060	Campaign email using Campaign Monitor	\$22.17
	William A. Scher William A. Scher William A. Scher	Alida Lewis Alida Lewis 39 Myrtle Street Northampton, MA 01060 William A. Scher 145 State Street Northampton, MA 01060 William A. Scher 145 State Street Northampton, MA 01060 William A. Scher 145 State Street Northampton, MA 01060 Kathleen Wight 20 Northern Ave Northampton MA 01060	Alida Lewis Say Myrtle Street Northampton, MA 01060 Food and supplies for event on 9/30/15 William A. Scher